

## Renewal of an Iowa Psychology Provisional License

	<b>Step 1 - Please write clearly and legibly</b>
License Number	
Last Name, First Name	
Mailing Address	
City, State, Zip Code	
E-mail address	
Primary Phone	

The certificate for the renewed provisional license cannot be issued until the completed application, supervision registration, and fee are received.

### **Step Two** - What is the renewal fee?

The renewal fee is \$170. Check or money order must be payable to the Iowa Board of Psychology. Renew early to avoid a lapse in licensure.

### **Iowa Law and Administrative Rules**

- To view the current Iowa Law and Administrative Rules online, go to <https://idph.iowa.gov/Licensure/Iowa-Board-of-Psychology/Laws-and-Rules>
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**Step Three** - The following five questions **must** be answered. If you answer “Yes” to any question below, (1) attach a signed letter of explanation providing the details of the incident, (2) attach a copy of any court ordered evaluations, showing completion and recommendations, and (3) attach a copy of all official court documents regarding your conviction/malpractice suit, including final disposition and/or settlement. You must answer “Yes” even when a conviction or judgment has been deferred or expunged from your record. **Since the time the provisional psychologist license was issued to you, have you:**

Yes	No	Been convicted, found guilty of, or entered a plea of guilty or no contest to a felony or misdemeanor crime (other than minor traffic violations with fines under \$500)? If you have already reported this incident to the licensing board you do not need to report it again.
Yes	No	Had any judgments or settlements paid on your behalf as a result of a malpractice suit or claim filed against you? If you have already reported this incident to the licensing board you do not need to report it again.
Yes	No	Been investigated by a licensing, registration, or certification authority or organization? If the investigation or action was instituted by this licensing board you may answer “NO” to this question.
Yes	No	Been disciplined or sanctioned by any other licensing, registration, or certification authority or organization related to your professional practice? If this licensing board took the disciplinary action, you may answer “NO” to this question.
Yes	No	Been engaged in illegal or improper use of drugs or other chemical mood altering substances? (If you are currently a participant in the Impaired Practitioner Review Committee, you may answer "NO" to this question.)

### **Step Four** – Current supervision plan.

Yes	No	I have provided my current notarized supervision plan. The Supervision Registration document can be downloaded from the following website: <a href="https://idph.iowa.gov/Licensure/Iowa-Board-of-Psychology/Licensure">https://idph.iowa.gov/Licensure/Iowa-Board-of-Psychology/Licensure</a>
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### **Step Five** - Certification/Attestation Statement

I certify that I have carefully read the questions on this application and have answered them completely and truthfully. I declare under penalty of perjury that my answers, and all other statements or information submitted by me in this application process, are true and correct. If it is determined at any time that I have provided misleading or false information on or in support of this application, I understand that my license may be subject to disciplinary action and criminal prosecution.

I understand that this application is a public record in accordance with Iowa Code chapter 22 and that application information is public information, subject to the exceptions contained in Iowa law. In submitting this application, I consent to any reasonable inquiry, including a continuing education audit that may be necessary to verify the information I have provided on, or in conjunction with, this application.

I attest that I do not have a medical condition which impairs or limits my ability to practice my profession with reasonable skill and safety and understand that I must notify the Board should such a condition arise which impairs or limits my ability to practice my profession with reasonable skill and safety.

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Licensee Signature

Date

Mailing Address:  
Board of Psychology  
IDPH/Bureau of Professional Licensure  
5th Floor, Lucas State Office Building  
321 E. 12th St.  
Des Moines, IA 50319